UNIT 19 THE IMMUNO-SUPRESSED SURGICAL PATIENT

UNIT OBJECTIVES:

1. Demonstrate knowledge of the principles and rationale for the assessment and management of the Immuno-suppressed patient with an acute abdomen.
2. Demonstrate the ability to manage surgical conditions in the patients with HIV.

COMPETENCY-BASED KNOWLEDGE OBJECTIVES

1. Delineate the most common causes of acute abdomen in the Immuno-suppressed patient:
   a. Cecal perforation
   b. Toxic megacolon
   c. Acalculous cholecystitis
   d. CMV enteritis
   e. Gastric ulcer perforation
2. Demonstrate a working knowledge of the limitations of cellular and humoral immunity in Immuno-suppressed patients.
3. Describe the alteration of wound healing and risk of healing a bowel anastomosis in the immuno-suppressed patient.
4. Delineate the risk of transmission of HIV to health care workers in the operating room.
   a. open vs. laparoscopic surgery
   b. surgical pathologic specimens

COMPETENCY-BASED PERFORMANCE OBJECTIVES

1. Describe the peri-operative resuscitation of the immuno-suppressed patient.
   a. Cardio-pulmonary monitoring
   b. IV access
   c. Empiric antibiotic coverage
2. Differentiate between conventional open and scope-assisted surgery in Immuno-suppressed patient, including:
   a. Anesthetic considerations
   b. Effects of pneumoperitoneum
   c. Differences in patient outcome
   d. Infectious Complications (ie.HIV)
3. Discuss the conservative management of colonic disease if the immuno-suppressed patient.